

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED
FEC MAIL CENTER

Office Use Only

2007 APR 11 AM 11:15

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

FRIENDS OF PETER THERON

ADDRESS (number and street)

11021 SEQUOIA TRAIL



Check if different than previously reported. (ACC)

MADISON WI 53713-2522

2. FEC IDENTIFICATION NUMBER ▼

C00450353

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

WI

102

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the State of

WI

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the State of

WI

5. Covering Period

01/01/2009

through

03/31/2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Christine Makey

Signature of Treasurer

Christine Makey

Date

03/31/2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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(Revised 02/2003)